STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING 00 B. WING	06/28/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COUNTRY CHARM RESIDENTIAL SENIOR COMMUNITY	3177 MERIDIAN PARKE DR GREENWOOD, IN 46142

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
R0000	This visit was for a State Residential Licensure Survey Survey dates: 6/25-6/28/2012 Facility number: 011478 Provider number: 011478 AIM number: N/A Survey Team: Dinah Jones, RN-TC Marcy Smith, RN Patti Allen, BSW Census bed type: Residential: 78 Total: 78 Census payor type: Other: 78 Total: 78 Sample: 7 These state findings are cited in accordance with 410 IAC 16.2. Quality review completed on June 29, 2012 by Bev Faulkner, RN	R0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determined that other safegaurds provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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R0144	410 IAC 16.2-5-1.5(a) Sanitation and Safety Standards - Deficiency (a) The facility shall be clean, orderly, and in a state of good repair, both inside and out, and shall provide reasonable comfort for all residents. Based on observation and interview, the facility failed to ensure the carpet in the hallways was clean. This had the potential to affect 78 of 78 residents residing in the facility. Findings include: During a tour of the facility on 6/27/12 at 2:10 p.m., the following was observed on the 200 Hall: A 6 inch (in.) by 12 in. soiled area in front of the laundry room entrance A 2 in. diameter soiled area outside of Room 221 A 4 in. diameter soiled area outside of Room 234 A 1 1/2 in. diameter soiled area outside of Room 225 A 3 in. diameter soiled area in the center of the hallway between Rooms 230 and 232 A 6-8 in. diameter soiled area in the center of the hallway outside Room 218 A 1 in. by 5 in. soiled area outside Room 216. A 3 in. by 2 in. and 3 in. by 4 in. soiled area outside Room 214. 2- 2 in. by 2 in. soiled areas outside Room	R0144	Additional maintenamce staff has been added to accommodate the proper upkeep of the carpets and scheduling of cleaning has been changed to allow for cleaning to be done weekly or as needed. Completed by July 2, 2012To assure santization and cleanliness of the facilitys carpets we have created a daily and monthly cleaning schedule. The schedule is shared between housekeepers and a newly hired floor maintenance person. Night maintenance has a check off list for monthly and quarterly cleaning. Spot cleaning and the daily rug cleaning has been added to the housekeepers check off sheet. All cleaning will be monitored by the maintenance manager.	07/11/2012

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	212 A 2 1/2 foot (ft.) long section with scattered soiled areas outside Room 209 A 2 in. by 2 in. soiled area outside Room 207 A 2 in. by 3/4 in. soiled area outside Room 201 A 3 in. by 4 in. soiled area outside the beauty shop 8- 1 in. by 1 in. soiled areas outside the activity room 22- 1 in. by 1 in. - 3 in. by 4 in. soiled areas between the activity room and the front desk 5- 2 in. by 5 in. soiled areas between the front desk and the "employees only" entrance to the kitchen. During this same tour of the facility the following was observed in the common area main lobby: 1 ft. by 1 ft. soiled area in front of the fireplace 18 in. by 5 ft. soiled area in front of the couch facing the fireplace 4 in. by 1 ft. darkened area in front of the couch facing the front desk During this same tour of the facility the following was observed on the 100 hall: A 3 in. by 3 in. soiled area outside the "Gents" bathroom A 2 ft. by 2 in. soiled area outside the "Ladies" bathroom			

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	A 14 ft. by 1 ft. soiled area outside the clinic 4 2 in. by 2 in. soiled areas outside the mechanical room A 5 in. by 2 in. soiled area outside Room 106 A 4 ft. by 8 in. soiled area spanning the width of the hallway outside Room 113 A 1 in. by 1 in. soiled area outside Room 121 A 3 ft. by 18 in. soiled area outside Room 129 During an interview with Director of Nursing on 6/28/12 at 11:00 a.m., she indicated all of the residents residing in the facility access the 100 hall, 200 hall and/or the main lobby. During an interview with the Administrator on 6/28/12 at 11:30 a.m., she indicated the carpets in the above hallways were soiled and in need of cleaning.			

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R0154	410 IAC 16.2-5-1.5(k) Sanitation and Safety Standards - Deficiency (k) The facility shall keep all kitchens, kitchen areas, common dining areas, equipment, and utensils clean, free from litter and rubbish, and maintained in good repair in accordance with 410 IAC 7-24. Based on observation and interview, the facility failed to maintain clean Dining Room Tables in three (3) of three (3) dining rooms. Therefore potentially affecting 78 of 78 residents residing in the facility. Findings include: On 6/26/12 at 11:00 a.m., a resident who wished to remain confidential voiced their concerns about the dining room tables being dirty in the cracks in the tables. They indicated staff served the residents on these tables every day without cleaning the cracks. The resident indicated "would you like to eat off these dirty tables?" On 6/26/12 at 2:00 p.m., an observation of 18 of 18 dining tables in 3 of 3 dining rooms, indicated the tables were soiled. All of the tables had extension leafs added. The space on either side of the leaf had a visibly heavy accumulation of food, crumbs, dirt and dust. On 6/28/12 at 11:45 a.m., during an interview with the Administrator, after	R0154	Frequency of cleaning between table leaves has been changed to weekly and housekeeping staff will provide any additional daily cleaning requested by the Dietary Manager. Completed on 7/2/12To keep the dining room tables clean and sanitized, all tables are cleaned after each meal with a sanitizing solution. Tables will be broken down weekly by the housekeepers on Wednesday and Thursday to clean and sanitize between table leaves with sanitizing solution. This will be managed by the Dietary Manager. Cleaning of the tables and cleaning between table leaves has been put on the housekeeping weekly cleaning list and on the dietary daily assignment sheets to be checked off by the Dietary Manager and housekeepers when completed.	07/11/2012

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	she had observed the tables, she indicated they were soiled and needed to be clean.			